

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	<i>she</i>	946	3-10-01
FORMALITY REVIEW			05-21-01
RESPONSE FORMALITY REVIEW	<i>ppb</i>	1030	10-26-01

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Date
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If more than 150 claims or 10 actions  
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6-17  
10-26-01  
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